AMENDMENT TRANSMITTAL LETTER (Large Entity) Applicant(s): Akio Uchiyama					Docket No. 17406			
Application No.	Filing Date	Examiner		Customer i	Vo.	Group Art Unit		Confirmation No.
10/766,581	January 27, 2004	Kasztejna, Matthew John		23389		3739		3837
Invention: CAPSULE MEDICAL DEVICE								
COMMISSIONER FOR PATENTS:								
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.								
CLAIMS AS AMENDED								
	CLAIMS REMAINING	HIGHEST #	NUMB	ER EXTRA		RATE		ADDITIONAL
TOTAL 01 1110	AFTER AMENDMENT	PREV. PAID FOR	CLAIMS	PRESENT	H	AFO 00		FEE
TOTAL CLAIMS INDEP, CLAIMS	9 -	27 = 5 =		0	x	\$50.00 \$200.00		\$0.00 \$0.00
				-	×	\$200.00		\$0.00
Multiple Dependent Claims (check if applicable) TOTAL ADDITIONAL FEE FOR THIS AMENDMENT								\$0.00
☐ A check in ☐ The Direct communic ☐ Any a ☐ Any p ☐ Payment b WARNING	ation or credit any ove additional filling fees red attent application process by credit card. Form P ⁻¹ : Information on this on this form. Provide	to cover the filing d to charge payment of rpayment to Deposit Ac quired under 37 C.F.R. essing fees under 37 Cl	fee is e the folk count 1.16. FR 1.17 blic. Co n and a	owing fees a 19-1013/SS redit card in	on c	mation shou on PTO-2038	ıld ı	not be
Seth Weinfeld Registration No. 5	1/		the Ur class r P.O. B	Med States P nail irvan enve ox 1450, Neva (Date)	osta lope indri	I Service with a addressed to "C	orres	